



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3927

| | | | | |
|-----------------------------|-----------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER 10/688,489 | FILING DATE 10/16/2003 RULE | CLASS 435 | GROUP ART UNIT 1648 | ATTORNEY DOCKET NO. GP140-04.UT |
|-----------------------------|-----------------------------------|--------------|------------------------|------------------------------------|

APPLICANTS

Jeffrey M. Linnen, Poway, CA;
~~Reinhold B. Pollner, San Diego, CA;~~
~~Wen Wu, Carlsbad, CA; Geoffrey G. Dennis, San Diego, CA;~~
~~Paul M. Darby, San Diego, CA;~~

** CONTINUING DATA *****

This appln claims benefit of 60/418,891 10/16/2002
and claims benefit of 60/429,006 11/25/2002
and claims benefit of 60/449,810 02/24/2003

*Corr
08/23/06*

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 08/11/2004

| Foreign Priority claimed | <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY | SHEETS | TOTAL | INDEPENDENT |
|---------------------------------|---|---------------------|--------------|--------------|-------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | CA | DRAWING 3 | CLAIMS 82 | CLAIMS 6 |
| Verified and Acknowledged | Examiner's Signature _____ Initials _____ | | | | |

ADDRESS

21365
GEN PROBE INCORPORATED
10210 GENETIC CENTER DRIVE
SAN DIEGO, CA
92121

TITLE

Compositions and methods for detecting west nile virus

| | | |
|------------------|---|---|
| FILING FEE | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
| RECEIVED 2274 | | |



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov



CONFIRMATION NO. 3927

Bib Data Sheet

| | | | | |
|-----------------------------|--|--------------|------------------------|---------------------------------------|
| SERIAL NUMBER 10/688,489 | FILING OR 371(c) DATE 10/16/2003 RULE | CLASS 435 | GROUP ART UNIT 1648 | ATTORNEY DOCKET NO. GP140-04.UT |
|-----------------------------|--|--------------|------------------------|---------------------------------------|

APPLICANTS

Jeffrey M. Linnen, Poway, CA;

** CONTINUING DATA *****

This appln claims benefit of 60/418,891 10/16/2002
and claims benefit of 60/429,006 11/25/2002
and claims benefit of 60/449,810 02/24/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 08/11/2004

| | | | | | |
|---------------------------------|--|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY CA | SHEETS DRAWING 3 | TOTAL CLAIMS 82 | INDEPENDENT CLAIMS 6 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |

ADDRESS

21365

TITLE

Compositions and methods for detecting west nile virus

| | | |
|--------------------------------|---|--|
| FILING FEE RECEIVED 2274 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|--------------------------------|---|--|